

HAMILTON COUNTY JUVENILE COURT
PERSONAL IDENTIFICATION FORM

CASE NUMBER: _____

1. Name and Date of Birth of child or children:

Name: _____ Initials: _____ DOB: _____ Sex: _____ Soc. Sec.: _____

Name: _____ Initials: _____ DOB: _____ Sex: _____ Soc. Sec.: _____

Name: _____ Initials: _____ DOB: _____ Sex: _____ Soc. Sec.: _____

Name: _____ Initials: _____ DOB: _____ Sex: _____ Soc. Sec.: _____

2. Biological Father's Name: _____ (Alias Name) _____ DOB: _____

Complete Address: _____ Zip Code: _____

Social Security Number: _____ Phone Number: (_____) _____

Employer & Address: _____

3. Biological Mother's Name: _____ (Maiden/Alias Name) _____ DOB: _____

Complete Address: _____ Zip Code: _____

Social Security Number: _____ Phone Number: (_____) _____

Employer & Address: _____

4. Petitioner (s) Name: _____ DOB: _____

Complete Address: _____ Zip Code: _____

Social Security Number: _____ Phone Number: (_____) _____

Employer & Address: _____

5. Relationship to the child or children: _____

6. Current Address of child or children: _____ Zip Code: _____

7. Name of person (s) currently providing care and supervision: _____

Phone Number: (_____) _____

8. Was Child Custody Affidavit, mandated by § 3127.23 -O.R.C., filed? (Form 551 Included with packet) Yes No

9. Has an Affidavit for Publication been filed (When address can't be identified) Yes No

10. Has the Father of the child or children been ordered to pay Child Support? Yes No

11. Does any other person (s), excluding the biological parents, have any Court Ordered Custody or Visitation Rights concerning this child or these children? Yes No If so, please list: Name: _____

Complete Address: _____ Zip Code: _____

Social Security Number: _____ Phone Number: (_____) _____

Relationship to the child or children: _____

12. Are any Social Service Agencies currently involved with this child or these children? Yes No If so list Agency:

Name: _____ Caseworker: _____

13. Attorney's Name: _____ Address: _____

City: _____ State: _____ Phone: (_____) _____